

# United States District Court

Southern

DISTRICT OF

New York

Riverkeeper, Inc., Soundkeeper, Inc., Raritan Baykeeper, Inc.  
(d/b/a NY/NJ Baykeeper), Delaware Riverkeeper Network,  
American Littoral Society, Save The Bay—People For  
Narragansett Bay, Friends of Casco Bay, and Santa Monica  
Baykeeper

V.

U.S. ENVIRONMENTAL PROTECTION AGENCY  
and STEPHEN L. JOHNSON, in his official capacity  
as Administrator of the United States Environmental  
Protection Agency,

## SUMMONS IN A CIVIL CASE

CASE NUMBER:

**06 CV 12987**

TO: (Name and address of defendant)

Environmental Protection Agency, Ariel Rios Building, 1200 Pennsylvania Avenue, N.W.  
Washington, DC 20460  
Stephen L. Johnson, Ariel Rios Building, 1200 Pennsylvania Avenue, N. W., Mail Code:  
1101A, Washington, DC 20460

**YOU ARE HEREBY SUMMONED** and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Reed W. Super, Environmental Law Clinic, Columbia University, 435 West 116th Street, New  
York, NY 10027

an answer to the complaint which is herewith served upon you, within 60 days after service of this  
summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for  
the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period  
of time after service.

**J. MICHAEL McMAHON**

CLERK

*Marcos Quintero*

(BY) DEPUTY CLERK

**NOV 07 2006**

DATE

AO 440 (Rev. 10/93) Summons In a Civil Action -SDNY WEB 4/99

**RETURN OF SERVICE**DATE 11/8/06Service of the Summons and Complaint was made by me<sup>1</sup>

NAME OF SERVER (PRINT)

REED SUPER

TITLE

SENIOR CLINICAL STAFF ATTORNEY

Check one box below to indicate appropriate method of service

- ☐ Served personally upon the defendant. Place where served: \_\_\_\_\_
- ☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.  
Name of person with whom the summons and complaint were left: \_\_\_\_\_
- ☐ Returned unexecuted: \_\_\_\_\_
- ☒ Other (specify): SUMMONS AND COMPLAINT SENT CERTIFIED MAIL, RETURN RECEIPT REQUESTED  
(SEE ATTACHED PROOF OF DELIVERY)

**STATEMENT OF SERVICE FEES**

TRAVEL

SERVICES

TOTAL

**DECLARATION OF SERVER**

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on 3/16/07

Date

Signature of Server

COLUMBIA LAW SCHOOL435 W 116<sup>TH</sup> ST. NEW YORK, NY 10027

Address of Server

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Stephen L. Johnson, Admin.  
US Environmental Protection  
Agency  
Ariel Rios Building  
1200 Pennsylvania Ave NW  
Washington, D.C. 20460

## 2. Article Number

(Transfer from service label)

7004 0750 0001 8934 6244

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

☐ Agent☒ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

11/13/06

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

## 3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Office of General Counsel  
US Environmental Protection  
Agency  
Ariel Rios Building  
1200 Pennsylvania Ave NW  
Washington, D.C. 20460

## 2. Article Number

(Transfer from service label)

7004 0750 0001 8934 6251

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

☐ Agent☒ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

11/13/06

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

## 3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

The Hon. Alberto Gonzalez  
Attorney General of the  
United States  
US Dept of Justice  
950 Pennsylvania Ave NW  
Washington, D.C. 20530

## 2. Article Number

(Transfer from service label)

7004 0750 0001 8934 6268

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

☒☐ Agent☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

## 3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>J King</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Michael J. Garcia  United States Attorney  (Attn: Civil Process Clk)  36 Chambers Street  New York, NY 10007</p>		<p>B. Received by (Printed Name) <i>J King</i> C. Date of Delivery</p>	
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number  (Transfer from service label)</p>		<p>7004 0750 0001 8984 6275</p>	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540